entire village in India. When we think of our future the by-now familiar specter of ever-increasing smog, pollution, and horrendous freeway crowding arises before us. In addition, the amoeba-like, cancerous sprawl of urban developments inexorably paving over peri-urban greenery makes clear the necessity, beginning now, of no exceptions to the moral imperative of the two-child limit.

Physicians are an influential component of the opinion-making elite in California. Now that thousands of doctors have quit smoking and urged their patients to do the same, we are beginning to see results. When doctors start refusing to have more than two children, and urge their patients to do the same, their impact may be profound. To do less would clearly be abrogating the physician's responsibility to maintain the highest level of health in the community. It is to this end that I feel the CMA should direct its efforts.

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## **MEDEX Program**

To the Editor: Having spent two years in a general practice residency and five years in private general practice, I am very much aware of the need to supplement the physician's time and energy with qualified and trained individuals to do many of the things which the physician himself is now forced to do. I have been following with interest the developments at Duke and the University of Colorado with their training of physician's assistants. The most recent program in this area, the MEDEX program at the University of Washington, seems to be an excellent new approach, not only filling the need, but also utilizing personnel who otherwise would find little or no use for their abilities in civilian life; and additionally, not depriving other professions (such as public health nurses) of badly needed people. I note with interest that the Washington State Medical Association is a co-sponsor of the MEDEX program, and would strongly encourage the CMA to begin immediately to investigate and implement the same type of, or similar, program.

In short, the private physicians, especially in rural areas, are being swamped, and we need help.

We can't wait for new M.D.'s, and in many instances we don't need such highly trained personnel. We need capable people in intermediate positions, and the sooner the state association realizes this and starts advancing in this direction, the sooner the people in California, including its doctors, will have adequate medical care.

N. B. SMITH, M.D. Woodland

## **More Nutrition**

To the Editor: Dr. Tom Brewer has kindly sent me a copy of his letter to the editor of CALIFORNIA MEDICINE [published in the March, 1970, issue]. This letter concerns the December, 1969, White House Conference on Food, Nutrition and Health. The letter presents several statements and points of view which, if taken by themselves, might create too restrictive a view of the purposes and accomplishments of the Conference. In this connection, the final report of the Conference will be published in March, 1970. I believe that the study of the final report will be well worth the time involved. As Dr. Mayer stated in his letter of transmittal, "The demonstration that, at a time when divisions and confrontations are common in our land, forceful and sometimes militant Americans of all walks of life and persuasion can be brought together and, after spirited discussion, agree on common priorities in the service of the Country and of one's fellow man is deeply reassuring."

Nevertheless, one point made in the letter does require emphasis. As the letter properly states, "one urgent need is to apply (author's italics) scientific nutrition in human prenatal care." This statement in turn leads to questions about how this should be done, under what circumstance, who should do it, where should the responsibility lie, and so on. And, it was precisely to questions such as these that the work of the Conference was addressed, as can be seen in its report.

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